PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number

Effective October 1, 2000

002039 -095705

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OR			OTHER THAN SMALL ENTITY											
TOTAL CLAIMS			2/5				ı	RATE	FEE	1	RATE	FEE										
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00										
TOTAL CHARGEABLE CLAIMS			少 5 minus 20=		. 25			X\$ 9=	225	OR	X\$18=											
INDEPENDENT CLAIMS			minus 3 =		0			X40=		OR	X80=	_										
ML	ILTIPLE DEPEN	IDENT CLAIM P	RESENT					+135=		OR	+270=											
* If	the difference	in column 1 is	less than ze	ero, entei	r "0" in c	olumn 2	1	TOTAL	580	ОR	TOTAL											
CLAIMS AS AMENDED - PART II										• 1	OTHER	THAN										
_		(Column 1)		(Colur		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY										
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE										
	Total	*	Minus	**		= '		X\$ 9=		OR	X\$18=											
	Independent	* NTATION OF ME	Minus	***	CLAIM	-		X40=		OR	X80=											
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=	:	OR	+270=											
								TOTAL ADDIT. FEE	. i	OR	TOTAL ADDIT. FEE											
			, DOII. I EE			ADDII. 1 CE																
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	·	RATE	ADDI- TIONAL FEE										
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=											
AME	Independent	* NTATION OF MU	Minus	***	CLAINA	=		X40=		OR	X80=	,										
			CHIPCE DEF	ENDENT	CLAIIVI			+135=		OR	+270=											
`							L	TOTAL DDIT. FEE		OR	TOTAL											
		(Column 1)		(Colun		(Column 3)	. ~	10011. FEE			ADDIT. FEE											
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE										
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=											
	Independent	NTATION OF MI	Minus	***	CLAIM	=		X40=		OR	X80=											
Ш	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=											
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ** TOTAL																						
***	f the "Highest Nu	mber Previously Pa	id For" IN THIS	S SPACE is	s less thar	3, enter "3."	^1			•	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											